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there was a wide diversity of opinion upon the revision of many of the titles and rubrics.

It was noticeable, as the work of the commission progressed, that there was opposition to any subdivision of titles and multiplication of the number of rubrics, any proposition looking to either of these ends being almost universally voted down and in some instances the discussion on such propositions being apparently cut short.

Another feature worthy of notice was that in the arrangement of the classification of diseases and causes of death, it was the convenience of the statistician, rather than the ideas of the pathologist that was given chief consideration, but as the classification is intended primarily for the use of statisticians, this would seem to be justifiable.

After five sessions, a protocol of signature was prepared and signed by one delegate from each country on the afternoon of July 3, and immediately thereafter the commission adjourned.

The delegates were the recipients of numerous hospitalities, and among the invitations received was that to a lunch to the American delegation by the American ambassador at Paris, and one to a reception to the entire commission by the President of the French Republic and Madame Faillières, on Sunday, July 4, 1909.

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### AMŒBIC DYSENTERY IN SAN FRANCISCO, CAL.

By H. W. Austin, Surgeon, United States Public Health and Marine-Hospital Service

Cases of amœbic dysentery are now frequently admitted to this hospital (Marine Hospital, San Francisco). The total number of such cases received from December 1, 1908, to August 9, 1909, was 55, 16 of which, it is believed, originated in California.

A thorough and careful examination was made in each case, and no case was recorded as amœbiasis until living motile amœbæ were found in the stools on several different days, nor was it then recorded unless the patient had also the clinical symptoms of the disease. In one case operated on for appendicitis motile amœbæ were found in the ulcerated appendix, and in several cases with liver abscess the motile amœbæ were found in the abscess.

A careful investigation of the antecedents of each case was made, and it was found that of the 55 cases suffering from amœbiasis 16 had undoubtedly contracted the disease on the Pacific coast of the United States. I concur in the opinion of Passed Assistant Surgeon Long that the disease is undoubtedly spread here by the eating of fresh vegetables raised by Chinese truckmen, who fertilize the plants with human excreta, as is the custom in China and other oriental countries. The matter has been brought to the attention of the local health authorities, who, it is believed, will find means to exercise effective supervision over gardens where vegetables are raised for the market.

At a recent meeting of the San Francisco board of health, called to consider this matter, the following measures were decided upon:

1. Amœbic dysentery, or amœbiasis, to be declared an infectious disease, and all physicians and hospitals notified that cases coming to their knowledge must be reported to the board of health.

2. That a resolution be presented to the board of supervisors, urgently requesting the extension of the jail sewer to the city sewer, and also urging that the construction of Islais Creek sewer be hastened as rapidly as possible.

3. The health officer was directed to prepare an ordinance to present to the board of supervisors, making the use of human excrement and sewage for the irrigation or fertilization of vegetables a misdemeanor.

4. That as soon as possible sanitary inspectors be appointed to investigate the condition of vegetable gardens.

5. That samples of vegetables be collected and sent to Acting Assistant Surgeon Wherry, United States Public Health and Marine-Hospital Service, at the plague laboratory, Oakland, to determine whether or not *amœbæ* could be cultivated from them.

The practicability of licensing the sale of vegetables in the city, in order to maintain control over such gardens as were located outside of the city limits was discussed, but was left for another time.

The *amœba* has also been demonstrated by one of the hospital staff in several recent cases of dysentery occurring in this city in the practice of private physicians.

The usual treatment of cases at this hospital has been, first, large doses of ipecac given in salol-coated capsules; later high enemata of 1 to 1,000 quinine solution. Appendicostomy was performed in a few cases last year, but usually this operation is not found to be essential to successful treatment.

## UNITED STATES.

[Reports to the Surgeon-General, Public Health and Marine-Hospital Service.]

### *Reports from San Francisco, Cal.—Plague-prevention work at San Francisco, Oakland, and Point Richmond.*

#### Surgeon Blue reports:

##### SAN FRANCISCO, CAL.

Last case of human plague: Sickened, January 30, 1908.

Last case of rodent plague: October 23, 1908.

*Week ended September 4, 1909.*

Sick inspected.....	2
Plague.....	0
Dead inspected.....	109
Plague.....	0
Premises inspected.....	2,200
Houses disinfected.....	30
Houses destroyed.....	1
Buildings condemned.....	8
Nuisances abated.....	222
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Rats found dead.....	12
Rats trapped.....	2,224
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Total rats taken.....	2,236
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Rats identified:	
<i>Mus norvegicus</i> .....	1,642
<i>Mus rattus</i> .....	53
<i>Mus musculus</i> .....	521
<i>Mus alexandrinus</i> .....	10
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Total.....	2,226
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